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## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

Application or Docket Number

004-4911-1

| CLAIMS AS FILED - PART I (Column 1) (Column 2)            |  |   |                                    |                       |                               |                            |            | SMALL ENTITY TYPE OF |                        |       | OTHER THAN R SMALL ENTITY |                        |
|---|--|---|------------------------------------|-----------------------|-------------------------------|----------------------------|------------|----------------------|------------------------|-------|---------------------------|------------------------|
| TOTAL CLAIMS  |  |   | 30                                 |                       |                               |                            |            | RATE                 | FEE                    |       | RATE                      | FEE                    |
| FOR   |  |   | NUMBER FILED                       |                       | NUMBER EXTRA                  |                            |            | BASIC FEE            | 355.00                 | OR    | BASIC FEE                 | 710.00                 |
| TOTAL CHARGEABLE CLAIMS                                   |  |   | 30 minus 20=                       |                       | . 10                          |                            |            | X\$ 9=               |                        | OR    | X\$18=                    | 180                    |
| INDEPENDENT CLAIMS  |  |   | f minus 3 =                        |                       | 2                             |                            |            | X40=                 |                        | OR    | X80=                      | 160                    |
| MU  | LTIPLE DEPEN   | RESENT                                    | ESENT                              |                       |                               |                            | +135=      |                      | OR                     | +270= |                           |                        |
| * If the difference in column 1 is less than zero, enter  |  |   |                                    |                       |                               | olumn 2                    |            | TOTAL                |                        | OR    | TOTAL                     | 1050                   |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column |  |   |                                    |                       |                               |                            |            | SMALL E              | NTITY                  | OR    | OTHER<br>SMALL I          |                        |
| Ė   |  | (Column 1)<br>CLAIMS                      |                                    | _                     | mn 2)<br>IEST                 | (Column 3)                 | 1          | 7                    |                        | )<br> |                           | ADDI-                  |
| AMENDMENT A   |  | REMAINING<br>AFTER<br>AMENDMENT           |                                    | NUN<br>PREVI          | IBER<br>OUSLY<br>FOR          | PRESENT<br>EXTRA           |            | RATE                 | ADDI-<br>TIONAL<br>FEE |       | RATE                      | TIONAL<br>FEE          |
|   | Total  | . 30                                      | Minus                              | 2                     | 30                            | Ξ.                         |            | X\$ 9=               |                        | OR    | X\$18=                    | ·                      |
|   | Independent  | . 5                                       | Minus                              | *** (                 | 5                             | = [-                       | -          | X40 <u>⇒</u>         |                        | OR    | X80=                      |                        |
|   | FIRST PRESE  | NTATION OF M                              | ULTIPLE DEF                        | ENDEN                 | CLAIM                         |                            | j          | +135=                |                        | OR    | +270=                     |                        |
|   |  |   |                                    |                       |                               |                            |            | TOTAL                |                        | OR    | TOTAL<br>ADDIT, FEE       |                        |
|   |  |   | ADDIT. FEE                         | <u> </u>              |                               | ADDIT. PEE                 |            |                      |                        |       |                           |                        |
|   |  | (Column 1)                                |                                    |                       | mn 2)<br>HEST                 | (Column 3)                 | ት :        |                      | 4004                   | 1     |                           | 4001                   |
| AMENDMENT B   |  | REMAINING<br>AFTER<br>AMENDMENT           |                                    | NUN<br>PREVI          | MBER<br>OUSLY<br>FOR          | PRESENT<br>EXTRA           |            | RATE                 | ADDI-<br>TIONAL<br>FEE |       | RATE                      | ADDI-<br>TIONAL<br>FEE |
|   | Total  | •   | Minus                              | **                    |                               | =                          |            | X\$ 9=               |                        | OR    | X\$18=                    |                        |
|   | Independent  | •   | Minus                              | CNOCN                 | T C! AIM                      | =                          | -          | X40=                 |                        | OR    | X80=                      |                        |
| L   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |                                    |                       |                               |                            | ٤          | +135=                |                        | OR    | +270=                     |                        |
|   |  |   |                                    |                       |                               |                            | i          | TOTAL<br>ADDIT, FEE  |                        | OR    | TOTAL<br>ADDIT, FEE       |                        |
|   |  | (Column 1)                                |                                    |                       | mn 2)                         | (Column 3)                 | <u>_</u>   | _                    |                        |       |                           |                        |
| AMENDMENT C   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                    | NUN<br>PREVI          | HEST<br>MBER<br>HOUSLY<br>FOR | PRESENT<br>EXTRA           |            | RATE                 | ADDI-<br>TIONAL<br>FEE |       | RATE                      | ADDI-<br>TIONAL<br>FEE |
|   | Total  | •   | Minus                              | **                    |                               | =                          |            | X\$ 9=               |                        | OR    | X\$18=                    |                        |
|   | Independent  | •   | Minus                              | ***                   | T CLANA                       | =                          | 4          | X40=                 |                        | OR    | X80=                      |                        |
| Ĺ   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |                                    |                       |                               |                            |            | +135=                |                        | OR    | +270=                     |                        |
| •   | f the entry in colu  | mn 1 is less than t                       | he entry in colu<br>aid For IN THI | mn 2, writ<br>S SPACE | te "0" in col                 | iumn 3.<br>n 20, enter "20 | )."<br>)." | TOTAL                |                        | OR    | TOTAL<br>ADDIT, FEE       |                        |
| ***   | "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEEOR ADDIT. FEE |   |                                    |                       |                               |                            |            |                      |                        |       |                           |                        |